·								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO													
Effective October 1, 2003								16701717					
CLAIMS AS FILED - PART I								SMALL ENTITY TYPE			OTHER THAN		
TOTAL CLAUMS (Column 1) (Column 2)							_			OR		<del>-</del>	
<u> </u>			6				-	RATE FEE		4	RATE	FEE	
FC	)R 		NUMBER FILED		NUMBER EXTRA		BAS	BASIC FEE 385.00		OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			1 mius 20=		* 0		×	X\$ 9=		OR	X\$18=		
INE	DEPENDENT C	LAIMS	6 m	inus 3 =	-	>	×	X43= 129		OR	X86=		
MULTIPLE DEPENDENT CLAIM PRESENT								 145=		OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2							T	OTAL	<del> </del>	OR	TOTAL		
CLAIMS AS AMENDED - PART II									<u> </u>	2	OTHER	THAN	
	(Column 1) (Column 2) (Column 3)								ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER		HIGHI NUME PREVIO	BER	PRESENT EXTRA	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL		
	Total	*	Minus	PAID F	·UH	=	X	5 9=	FEE	OR	X\$18=	FEE_	
	Independent	*	Minus	***		=	-			Un			
Ā	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							43=		OR	X86=		
							+1	45=		OR	+290=		
								TOTAL T. FEE		OR	TOTAL ADDIT. FEE		
				-	•	•	•						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA	R/	ATE .	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	##		= .	XS	9=		OR	X\$18=		
	Independent	*	Minus	***		=	X	3=			X86=		
۷	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						<u> </u>			OR			
						•		45=		OR	+290 <u>÷</u>		
								OTAL FEE		OR ,	TOTAL ADDIT, FEE		
_		(Column 3)											
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	<b>d</b> k		a .	X\$	9=		OR	X\$18=		
ME	Independent	*	Minus	***		=	X4	<u></u>			X86=		
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						<b>-</b> ~	<u> </u>	—	OR	<b>~60=</b>		
• If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **Of the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  **Of the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR A	TOTAL DDIT. FEE		
T	he *Highest Num	ber Previously Paid	For (Total or	independer	it) is the	highest number f	ound in 1	he app	ropriate box	in colu	mn 1.		